

<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Patent Number	6,658,035
	Grant Date	December 2, 2003
	First Named Inventor	Mason, et al.
	Title	Tunable Laser Source With Integrated Optical Amplifier
	Art Unit	
	Examiner Name	
	Attorney Docket Number	74836-373489

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners at Customer Number

25764

☒ Please change the correspondence address for the above-identified application to:

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Individual Name

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City

State

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Country

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Email

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature

Name

Matthew Fawcett, SVP & General Counsel

Date

November 11, 2008

Telephone

408-546-5489

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_ forms are submitted.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.